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CONFIRMATION NO. 8225

|                                    |                                                               |                     |                               |                                                                 |
|------------------------------------|---------------------------------------------------------------|---------------------|-------------------------------|-----------------------------------------------------------------|
| <b>SERIAL NUMBER</b><br>10/799,258 | <b>FILING OR 371(c)<br/>DATE</b><br>03/12/2004<br><b>RULE</b> | <b>CLASS</b><br>324 | <b>GROUP ART UNIT</b><br>2829 | <b>ATTORNEY DOCKET<br/>NO.</b><br>2825.13US (90-<br>0051.15/US) |
|------------------------------------|---------------------------------------------------------------|---------------------|-------------------------------|-----------------------------------------------------------------|

## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

*E. J. K.*  
 This application is a CON of 10/317,417 12/11/2002 PAT 6,737,882 which is a CON of 09/568,707 05/11/2000 PAT 6,535,012 which is a DIV of 09/211,064 12/14/1998 PAT 6,091,254 which is a CON of 08/643,518 05/06/1996 PAT 5,905,382 which is a CON of 07/981,956 11/24/1992 PAT 5,539,324 which is a CIP of 07/575,470 08/29/1990 ABN

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

07/22/2004

|                                                                                                                                                     |                           |                        |                                   |                                         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|------------------------|-----------------------------------|-----------------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no                                                     | STATE OR<br>COUNTRY<br>ID | SHEETS<br>DRAWING<br>4 | TOTAL<br>CLAIMS<br><del>5</del> 4 | INDEPENDENT<br>CLAIMS<br><del>5</del> 1 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                           |                        |                                   |                                         |
| Verified and Acknowledged<br>Examiner's Signature <i>E. J. K.</i> Initials                                                                          |                           |                        |                                   |                                         |

## ADDRESS

24247

## TITLE

METHOD FOR TESTING USING A UNIVERSAL WAFER CARRIER FOR WAFER LEVEL DIE BURN-IN

|                                        |                                                                                                                   |                                                                                                                                                                                                                                                                                 |
|----------------------------------------|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FILING FEE<br/>RECEIVED</b><br>1400 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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